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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/779,402			ing Date 13/2004	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), or (c))		N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), or (m))		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A	N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 = *		*		X \$ =		OR	X \$ =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *				X \$ =			X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addi 35 U	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR									
Ш	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								ļ			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.									TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR	OTHER THAN R SMALL ENTITY		
AMENDMENT	04/15/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 21	Minus	** 21	= 0	1	X \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	* 4	Minus	***4	= 0		X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)	_	(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	w.	Minus	akrakr	=		X \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***	=		X \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))]			
ĕ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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